

#### IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

#### INFORMATION DISCLOSURE STATEMENT TRANSMITTAL

In re Application of: Kenneth M. Riff AGGREGATION PATIENT INFORMATION FOR USE IN MEDICAL DEVICE PROGRAMMING For: Serial No.: 10/675,691 September 30, 2003 Filed: CERTIFICATE OF MAILING UNDER 37 CFR 1.8: I hereby certify that this INFORMATION DISCLOSURE STATEMENT and the paper(s), as described herein, are being deposited in the U.S. Postal Service, as first MOLLY CHLEBECK **Printed Name Mail Stop Amendment** Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450 Sir: We are transmitting herewith the attached: Information Disclosure Statement **PTO FORM 1449** Return Postcard **FEE CALCULATION** \$ 00.00 Pursuant to 37 CFR §1.97(b) (before mailing of first Office Action) \$ 00.00 Pursuant to 37 CFR §1.97(c) with Certification (cited in foreign application not more than 3 months

earlier)

\$ 00.00 Pursuant to 37 CFR §1.97(e) with Certification

\$180.00 Pursuant to 37 CFR §1.97(d) without Certification

\$180.00 Pursuant to 37 CFR §1.97(d) with Certification

Applicant hereby petitions for a months' extension of time. If an additional extension of time is required, please consider this petition therefor.

Applicant believes that no extension of time is required. However, if an extension of time is required, please consider this a petition therefor to provide for the possibility that applicant has inadvertently overlooked the need for an extension of time.

Please charge any additional fees or credits to Deposit Account No. 13-2546 which may have been overlooked with regard to this filing. A duplicate of this transmittal is enclosed.

Date

Daniel G. Chapik Reg. No. 43,424

Telephone: (763) 514-3066 Customer No. 27581 DOCKET NO.: P-11279.00

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FEE C	ALCULATION
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Date	3/25/05 Dayliel G. Chapik Reg. No. 43,424 Telephone: (763) 514-3066

Customer No. 27581



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Applicant:	Kenneth M. Riff	)	Art Unit:	2171
Serial No.:	10/675,691	)	Examiner:	Unknown
Filed <sup>.</sup>	September 30, 2003	)	Docket:	P-11279.00

Conf No: 6170

For: AGGREGATING PATIENT INFORMATION FOR USE IN MEDICAL DEVICE

**PROGRAMMING** 

### **INFORMATION DISCLOSURE STATEMENT**

Mail Stop Amendment Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Dear Sir:

In compliance with the duty imposed by 37 C.F.R. § 1.56, and in accordance with C.F.R. §§ 1.97 *et. seq.*, the materials enclosed herewith are brought to the attention of the Examiner as possibly being of interest in connection with the above-identified patent application.

Consideration of each of the documents listed on the attached Form 1449 is respectfully requested. Pursuant to the provisions of M.P.E.P. §609, Applicant further requests that a copy of the Form 1449, marked as being considered and initialed by the Examiner, be returned with the next Official Communication.

Respectfully submitted,

Date: 3/15/05 By:

Paniel G. Chapik Reg. No. 43,424

Telephone: (763) 514-3066

Customer No. 27581

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PRATE DRADER!

Approved for use through 10/31/2002. OMB 0651-0031 U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

Complete if Known Cubstitute for form 1449A/PTO **Application Number** 10/675,691 INFORMATION DISCLOSURE Filing Date September 30, 2003 STATEMENT BY APPLICANT First Named Inventor Kenneth M. Riff Group Art Unit 2171 (use as many sheets as necessary) **Examiner Name** Unknown P11279.00 1 of 1 Attorney Docket Number Sheet

	U.S. PATENT DOCUMENTS							
Examiner Initials*	Cite <sup>1</sup> No.	U.S. Patent C		Name of Patentee or Applicant of Cited Document	Date of Publication of Cited Document MM-DD-YYYY	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear		
		Number	Kind Code <sup>2</sup> ( <i>if known</i> )					
	AA	6,477,424	B1	Thompson et al.	11/05/2002			
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	Cite <sup>1</sup> No.	Foreign Patent Document			ENT DOCUMEN	Date of	Pages, Columns, Lines,	Τ
Examine r Initials*		Office <sup>3</sup>	Number <sup>4</sup>	Kind Code⁵ ( <i>if known</i> )	Name of Patentee of Applicant of Cited Document	of Cited Cited Document Relevant Figure	Where Relevant Passages or Relevant Figures Appear	T⁵
	AB		EP 0 856 333	A2	Giorgio Rognoni	05/08/1998		
	AC		WO 01/49368	A1	Kurt R. Linberg	12/07/2001		1
			OTHER PRIOR	ART NON	PATENT LITERATUR	E DOCUMENTS		
Examiner Initials*	Cite <sup>1</sup> No.		include name of the	author (in CAPITA	AL LETTERS), title of the artic mposium, catalog, etc.), date, ity and/or country where publi	le (when appropriate) page(s), volume-issu	, title of the	T <sup>2</sup>

Examiner	Date
Signature	Considered

Burden Hour Statement: This form is estimated to take 2.0 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

<sup>\*</sup>EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw Line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

Unique citation designation number.

See attached Kinds of U.S. Patent Documents.

Enter Office that issued the document, by the two-letter code (WIPO Standard St.3).

For Japanese patent documents, the indication of the year of the reign of the Emperor must precede the serial number of the patent document. Kind of document by the appropriate symbol as indicated on the document under WIPO Standard ST. 16 if possible. Applicant is to place a check mark here if English language Translation is attached.

Unique citation designation number.

<sup>&</sup>lt;sup>2</sup> Applicant is to place a check mark here if English language translation is attached.